

# Notice of Meeting

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## Licensing Sub-Committee

**Monday 11th March 2013 at 2.00 pm**

in Council Chamber, Council Offices,  
Market Street, Newbury RG14 5LD

### **Members Interests**

Note: If you consider you may have an interest in any Application included on this agenda then please seek early advice from the appropriate officers.

Date of despatch of Agenda: Friday, 1 March 2013

### **FURTHER INFORMATION FOR MEMBERS OF THE PUBLIC**

If you require further information about this Agenda, or to inspect any background documents mentioned in the reports, please contact Denise Anns - Tel: (01635) 519486 - Email: [danns@westberks.gov.uk](mailto:danns@westberks.gov.uk).

Further information and Minutes are also available on the Council's website at [www.westberks.gov.uk](http://www.westberks.gov.uk)

(Martin's 11 High Street, Lambourn RG17 8XL)



To: Councillors Paul Bryant (Chairman), Geoff Mayes and Andrew Rowles  
Substitute: Councillor Peter Argyle

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# Agenda

Part I	Page No.
1 <b>Declarations of Interest</b> To receive any declarations of interest from Members.	
2 <b>Schedule of Licensing Applications</b>	
(1) <b>Application No. 13/00192/LQN - Martin's 11 High Street, Lambourn, Hungerford RG17 8XL</b> <b>Proposal:</b> Application for a premises licence <b>Location:</b> Martin's 11 High Street, Lambourn, Hungerford, RG17 8XL <b>Applicant:</b> Martin McColl Ltd	
3 <b>Application for a Premise Licence</b>	1 - 22
(1) <b>Premise Floor Plan</b>	23 - 24
(2) <b>Premise Supervisor Consent</b>	25 - 26
4 <b>Representations</b>	27 - 38

Andy Day  
Head of Strategic Support

West Berkshire Council is committed to equality of opportunity. We will treat everyone with respect, regardless of race, disability, gender, age, religion or sexual orientation.

If you require this information in a different format or translation, please contact Moira Fraser on telephone (01635) 519045.

R/N 22WS00064561  
13/00192/LQN  
£190-00

# Agenda Item 3

24 JAN 2013

Application for a premises licence to be granted  
under the Licensing Act 2003

RECEIVED

## PLEASE READ THE FOLLOWING INSTRUCTIONS FIRST

Before completing this form please read the guidance notes at the end of the form.  
If you are completing this form by hand please write legibly in block capitals. In all cases ensure that your answers are inside the boxes and written in black ink. Use additional sheets if necessary.  
You may wish to keep a copy of the completed form for your records.

I/We Martin McColl Ltd  
*(Insert name(s) of applicant)*

apply for a premises licence under section 17 of the Licensing Act 2003 for the premises described in Part 1 below (the premises) and I/we are making this application to you as the relevant licensing authority in accordance with section 12 of the Licensing Act 2003

### Part 1 – Premises Details

Postal address of premises or, if none, ordnance survey map reference or description			
Martins 11 High Street Lambourn Hungerford			
Post town	Berkshire	Post code	RG17 8XL

Telephone number at premises (if any)	01488 73676
Non-domestic rateable value of premises	£9,000

### Part 2 - Applicant Details

Please state whether you are applying for a premises licence as  
Please tick yes

- a) an individual or individuals \*  please complete section (A)
- b) a person other than an individual \*
  - i. as a limited company  please complete section (B)
  - ii. as a partnership  please complete section (B)
  - iii. as an unincorporated association or  please complete section (B)
  - iv. other (for example a statutory corporation)  please complete section (B)
- c) a recognised club  please complete section (B)
- d) a charity  please complete section (B)

- e) the proprietor of an educational establishment  please complete section (B)
- f) a health service body  please complete section (B)
- g) a person who is registered under Part 2 of the Care Standards Act 2000 (c14) in respect of an independent hospital  please complete section (B)
- h) the chief officer of police of a police force in England and Wales  please complete section (B)

\* If you are applying as a person described in (a) or (b) please confirm:

Please tick yes

- I am carrying on or proposing to carry on a business which involves the use of the premises for licensable activities; or
- I am making the application pursuant to a
  - statutory function or
  - a function discharged by virtue of Her Majesty's prerogative

**(A) INDIVIDUAL APPLICANTS** (fill in as applicable)

<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes
Current postal address if different from premises address					
Post Town				Postcode	
Daytime contact telephone number					
E-mail address (optional)					

**SECOND INDIVIDUAL APPLICANT** (if applicable)

<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Ms	Other Title (for example, Rev)	
Surname			First names		
I am 18 years old or over				<input type="checkbox"/>	Please tick yes

<b>Current postal address if different from premises address</b>			
<b>Post Town</b>		<b>Postcode</b>	
<b>Daytime contact telephone number</b>			
<b>E-mail address (optional)</b>			

**(B) OTHER APPLICANTS**

Please provide name and registered address of applicant in full. Where appropriate please give any registered number. In the case of a partnership or other joint venture (other than a body corporate), please give the name and address of each party concerned.

<b>Name</b> Martin McColl Ltd
<b>Address</b> Martin McColl House Ashwells Road Brentwood Essex CM15 9ST
<b>Registered number (where applicable)</b> 298945
<b>Description of applicant (for example, partnership, company, unincorporated association etc.)</b> Limited Company
<b>Telephone number (if any)</b> 01277 372916
<b>E-mail address (optional)</b> smahoney@martinmccoll.co.uk

**Part 3 Operating Schedule**

When do you want the premises licence to start?

Day		Month		Year	
2	8	0	1	1	3

If you wish the licence to be valid only for a limited period, when do you want it to end?

Day		Month		Year	
N	A				

Please give a general description of the premises (please read guidance note1)

The premises are a brick built construction and presently trade as a convenience store but without the benefit of a Premises Licence. Included with this application is a layout plan which confirms that the whole of the retail sales floor area is proposed to be covered by this application. Alcohol will be displayed within the retail area in such positions where it can be supervised by a combination of direct staff supervision and/or CCTV. The CCTV system will form part of the due diligence system which will be operable at the store (images will be maintained for a minimum of 31 days) The due diligence systems will also incorporate the operation of a refusals record together with general staff training providing guidance upon both the legal and social aspects of selling alcohol. The Company also provide continual external support through test purchasing operations. The Licensable activities will take place between the hours as specified on page 17 of this application form. This is an overview of the type of premises.

If 5,000 or more people are expected to attend the premises at any one time, please state the number expected to attend.

0

What licensable activities do you intend to carry on from the premises?

(Please see sections 1 and 14 of the Licensing Act 2003 and Schedules 1 and 2 to the Licensing Act 2003)

**Provision of regulated entertainment**

**Please tick yes**

- a) plays (if ticking yes, fill in box A)
- b) films (if ticking yes, fill in box B)
- c) indoor sporting events (if ticking yes, fill in box C)
- d) boxing or wrestling entertainment (if ticking yes, fill in box D)
- e) live music (if ticking yes, fill in box E)
- f) recorded music (if ticking yes, fill in box F)
- g) performances of dance (if ticking yes, fill in box G)
- h) anything of a similar description to that falling within (e), (f) or (g) (if ticking yes, fill in box H)

**Provision of entertainment facilities:**

- i) making music (if ticking yes, fill in box I)
- j) dancing (if ticking yes, fill in box J)
- k) entertainment of a similar description to that falling within (i) or (j) (if ticking yes, fill in box K)

**Provision of late night refreshment** (if ticking yes, fill in box L)

**Supply of alcohol** (if ticking yes, fill in box M)

**In all cases complete boxes N, O and P**

**A**

<b>Plays</b> Standard days and timings (please read guidance note 6)			<b>Will the performance of a play take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>			
				Outdoors	<input type="checkbox"/>			
				Both	<input type="checkbox"/>			
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>Please give further details here</b> (please read guidance note 3)					
Mon								
Tue								
Wed						<b>State any seasonal variations for performing plays</b> (please read guidance note 4)		
Thur								
Fri								
Sat						<b>Non standard timings. Where you intend to use the premises for the performance of plays at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sun								

**B**

<b>Films</b> Standard days and timings (please read guidance note 6)			<b><u>Will the exhibition of films take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the exhibition of films</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for the exhibition of films at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					



**C**

Indoor sporting events Standard days and timings (please read guidance note 6)			<u>Please give further details</u> (please read guidance note 3)
Day	Start	Finish	
Mon			
Tue			<u>State any seasonal variations for indoor sporting events</u> (please read guidance note 4)
Wed			<u>Non standard timings. Where you intend to use the premises for indoor sporting events at different times to those listed in the column on the left, please list</u> (please read guidance note 5)
Thur			
Fri			
Sat			
Sun			

**D**

<b>Boxing or wrestling entertainments</b> Standard days and timings (please read guidance note 6)			<b><u>Will the boxing or wrestling entertainment take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for boxing or wrestling entertainment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for boxing or wrestling entertainment at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					

**E**

<b>Live music</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of live music take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed					
Thur					
			<b><u>State any seasonal variations for the performance of live music</u></b> (please read guidance note 4)		
			<b><u>Non standard timings. Where you intend to use the premises for the performance of live music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Fri					
Sat					
Sun					

**F**

<b>Recorded music</b> Standard days and timings (please read guidance note 6)			<b>Will the playing of recorded music take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Day	Start	Finish	<b>Please give further details here</b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b>State any seasonal variations for the playing of recorded music</b> (please read guidance note 4)		
Thur					
Fri			<b>Non standard timings. Where you intend to use the premises for the playing of recorded music at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		
Sat					
Sun					

**G**

<b>Performances of dance</b> Standard days and timings (please read guidance note 6)			<b><u>Will the performance of dance take place indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b><u>Please give further details here</u></b> (please read guidance note 3)		
Mon					
Tue					
Wed			<b><u>State any seasonal variations for the performance of dance</u></b> (please read guidance note 4)		
Thur					
Fri					
Sat			<b><u>Non standard timings. Where you intend to use the premises for the performance of dance at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sun					

**H**

<p>Anything of a similar description to that falling within (e), (f) or (g) Standard days and timings (please read guidance note 6)</p>			<p><u>Please give a description of the type of entertainment you will be providing</u></p>		
Day	Start	Finish	<p><u>Will this entertainment take place indoors or outdoors or both – please tick</u> (please read guidance note 2)</p>	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<p><u>Please give further details here</u> (please read guidance note 3)</p>		
Wed					
Thur			<p><u>State any seasonal variations for entertainment of a similar description to that falling within (e), (f) or (g)</u> (please read guidance note 4)</p>		
Fri					
Sat			<p><u>Non standard timings. Where you intend to use the premises for the entertainment of a similar description to that falling within (e), (f) or (g) at different times to those listed in the column on the left, please list</u> (please read guidance note 5)</p>		
Sun					

I

<b>Provision of facilities for making music</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the facilities for making music you will be providing</u></b>	
			<b><u>Will the facilities for making music be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	
Day	Start	Finish	Indoors	<input type="checkbox"/>
			Outdoors	<input type="checkbox"/>
			Both	<input type="checkbox"/>
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)	
Tue				
Wed			<b><u>State any seasonal variations for the provision of facilities for making music</u></b> (please read guidance note 4)	
Thur				
Fri			<b><u>Non standard timings. Where you intend to use the premises for provision of facilities for making music at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)	
Sat				
Sun				

**J**

<b>Provision of facilities for dancing</b> Standard days and timings (please read guidance note 6)			<b><u>Will the facilities for dancing be indoors or outdoors or both – please tick (see guidance note 2)</u></b>		Indoors	<input type="checkbox"/>
					Outdoors	<input type="checkbox"/>
					Both	<input type="checkbox"/>
			<b><u>Please give a description of the facilities for dancing you will be providing</u></b>			
Day	Start	Finish	<b><u>Please give further details here (please read guidance note 3)</u></b>			
Mon						
Tue						
Wed						
Thur						
Fri						
Sat						
Sun			<b><u>State any seasonal variations for providing dancing facilities (please read guidance note 4)</u></b>			
			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for dancing entertainment at different times to those listed in the column on the left, please list (please read guidance note 5)</u></b>			



**K**

<b>Provision of facilities for entertainment of a similar description to that falling within i or j</b> Standard days and timings (please read guidance note 6)			<b><u>Please give a description of the type of entertainment facility you will be providing</u></b>		
Day	Start	Finish	<b><u>Will the entertainment facility be indoors or outdoors or both – please tick</u></b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
Mon				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
Tue			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Wed					
Thur					
Fri			<b><u>State any seasonal variations for the provision of facilities for entertainment of a similar description to that falling within i or j</u></b> (please read guidance note 4)		
Sat					
Sun					
			<b><u>Non standard timings. Where you intend to use the premises for the provision of facilities for entertainment of a similar description to that falling within i or j at different times to those listed in the column on the left, please list</u></b> (please read guidance note 5)		

L

<b>Late night refreshment</b> Standard days and timings (please read guidance note 6)			<b>Will the provision of late night refreshment take place indoors or outdoors or both – please tick</b> (please read guidance note 2)	Indoors	<input type="checkbox"/>
				Outdoors	<input type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>			
Mon			<b><u>Please give further details here</u></b> (please read guidance note 3)		
Tue					
Wed			<b><u>State any seasonal variations for the provision of late night refreshment</u></b> (please read guidance note 4)		
Thur					
Fri			<b><u>Non standard timings. Where you intend to use the premises for the provision of late night refreshment at different times, to those listed in the column on the left, please list</u></b> (please read guidance note 5)		
Sat					
Sun					

**M**

<b>Supply of alcohol</b> Standard days and timings (please read guidance note 6)			<b>Will the supply of alcohol be for consumption (Please tick box)</b> (please read guidance note 7)	On the premises	<input type="checkbox"/>
				Off the premises	<input checked="" type="checkbox"/>
				Both	<input type="checkbox"/>
<b>Day</b>	<b>Start</b>	<b>Finish</b>	<b>State any seasonal variations for the supply of alcohol</b> (please read guidance note 4)		
Mon	05.30	23.00			
Tue	05.30	23.00			
Wed	05.30	23.00			
Thur	05.30	23.00			
Fri	05.30	23.00			
Sat	05.30	23.00			
Sun	05.30	23.00			
			<b>Non standard timings. Where you intend to use the premises for the supply of alcohol at different times to those listed in the column on the left, please list</b> (please read guidance note 5)		

**State the name and details of the individual whom you wish to specify on the licence as premises supervisor**

<b>Name</b> Steve Mahoney	
<b>Address</b> 18 Chiltern Close Chelmsford Essex	
<b>Postcode</b>	CM1 2GJ
<b>Personal Licence number (if known)</b> EZ09/00067	
<b>Issuing licensing authority (if known)</b> Chelmsford B C	

**N**

**Please highlight any adult entertainment or services, activities, other entertainment or matters ancillary to the use of the premises that may give rise to concern in respect of children (please read guidance note 8)**

These premises will benefit from a Premises Licence for consumption of alcohol off the premises only. there will be no adult entertainment in order to ensure compliance with legislation. The company will operate a ' Challenge 25' policy as a minium requirement whereby any person appearing to be aged 25 or under must prove that they are in fact over the lawful age of 18 for the purpose of sale of alcohol. Acceptable forms of identification as proof of age are a ten year passport, a photocard driving licence and an approved PASS logo proof of age card. All staff are obligated to familiarise themselves with these requirments. The company will operate a due dilligence policy, incorporating the minium challenge 25 policy as above, also incorporating full training for all staff, the operaton of a refusal record and refresher training on a regular basis.

This store will operate a fully recordable cctv system which is overtly operable. There will be a prominet signage located throught the store confirming the legal minium age for the purchase of alcohol and the company pollicy.

**O**

<b>Hours premises are open to the public</b> Standard days and timings (please read guidance note 6)			<b>State any seasonal variations</b> (please read guidance note 4)
Day	Start	Finish	
Mon	05.30	23.00	
Tue	05.30	23.00	
Wed	05.30	23.00	
Thur	05.30	23.00	
Fri	05.30	23.00	
Sat	05.30	23.00	
Sun	05.30	23.00	

**P** Describe the steps you intend to take to promote the four licensing objectives:

**a) General – all four licensing objectives (b,c,d,e) (please read guidance note 9)**

We are a national retailer that sells alcohol as part of a broad offering of goods and services. We have held off-licenses in our stores for many years and are an approved British Institute of Inn-Keeping examination centre. We have written training policies and formal training programs are in place, which ensure our people are equipped to meet all licensing objectives. All training and revision / refresher materials are reviewed regularly. We have introduced our "Think 25" policy to all our stores, this policy is brought to the customers attention through point of sale material at the checkout and wherever alcohol is displayed for sale.

**b) The prevention of crime and disorder**

The premises has digital CCTV system that covers many areas of the shop floor, including the proposed area which will be used for display of beer and wine. High value alcoholic products such as champagne and spirits will be displayed behind the sales counter. Images are retained for a minimum of 31 days and made available on request by an authorised person. A member of the Management team is on the premises all the time the store is open.

**c) Public safety**

A member of the Management team is on the premises all the time the store is open and is trained to manage the store including looking after the safety of the public. The store adheres to all rules and regulations relating to public safety.

**d) The prevention of public nuisance**

These premises are proposed to be licensed for the consumption of liquor off the premises only. In addition to there being no consumption on the premises, there is no form of entertainment on the premises. There are no outdoor area utilised for the benefit of member of the public and the nature of the operation does not require the employment of door supervisors or use of dedicated cab firms. The store is an active member of the community and is always happy to liaise with police and enforcement authorities should the need arise.

**e) The protection of children from harm**

All staff are trained and have regular refresher training on the corporate "Think 25" policy. Staff are trained to look at the customer and "Think 25" when selling age restricted products. A till prompt will appear on the initial sale of alcohol that will remind the seller of the Think 25 policy and remind staff not to sell alcohol to anyone under the age of 18. The Company also provide continual external support through test purchasing operations. When alcohol is refused by the seller the refusal is recorded and refusals frequently checked on a regular basis by a Manager. The store displays signage around the store informing both staff and customers of our "Think 25" policy.

Please tick yes

- I have made or enclosed payment of the fee
- I have enclosed the plan of the premises
- I have sent copies of this application and the plan to responsible authorities and others where applicable
- I have enclosed the consent form completed by the individual I wish to be premises supervisor; if applicable
- I understand that I must now advertise my application
- I understand that if I do not comply with the above requirements my application will be rejected

**IT IS AN OFFENCE, LIABLE ON CONVICTION TO A FINE UP TO LEVEL 5 ON THE STANDARD SCALE, UNDER SECTION 158 OF THE LICENSING ACT 2003 TO MAKE A FALSE STATEMENT IN OR IN CONNECTION WITH THIS APPLICATION**

**Part 4 – Signatures** (please read guidance note 10)

**Signature of applicant or applicant’s solicitor or other duly authorised agent** (See guidance note 11). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	S Mahoney - 23 January 2013
Capacity	Licensing Practitioner

**For joint applications signature of 2<sup>nd</sup> applicant or 2<sup>nd</sup> applicant’s solicitor or other authorised agent.** (please read guidance note 12). **If signing on behalf of the applicant please state in what capacity.**

Signature	
Date	
Capacity	

**Contact name (where not previously given) and postal address for correspondence associated with this application** (please read guidance note 13)

Steve Mahoney  
Martin McColl  
Ashwells Road  
Brentwood

<b>Post town</b>	Essex	<b>Post code</b>	CM15 9ST
------------------	-------	------------------	----------

<b>Telephone number (if any)</b>	01277 376357
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**If you would prefer us to correspond with you by e-mail your e-mail address (optional)**  
smahoney@martinmccoll.co.uk

## Notes for Guidance

1. Describe the premises. For example the type of premises, its general situation and layout and any other information which could be relevant to the licensing objectives. Where your application includes off-supplies of alcohol and you intend to provide a place for consumption of these off-supplies you must include a description of where the place will be and its proximity to the premises.
2. Where taking place in a building or other structure please tick as appropriate. Indoors may include a tent.
3. For example the type of activity to be authorised, if not already stated, and give relevant further details, for example (but not exclusively) whether or not music will be amplified or unamplified.
4. For example (but not exclusively), where the activity will occur on additional days during the summer months.
5. For example (but not exclusively), where you wish the activity to go on longer on a particular day e.g. Christmas Eve.
6. Please give timings in 24 hour clock (e.g. 16:00) and only give details for the days of the week when you intend the premises to be used for the activity.
7. If you wish people to be able to consume alcohol on the premises please tick on, if you wish people to be able to purchase alcohol to consume away from the premises please tick off. If you wish people to be able to do both please tick both.
8. Please give information about anything intended to occur at the premises or ancillary to the use of the premises which may give rise to concern in respect of children, regardless of whether you intend children to have access to the premises, for example (but not exclusively) nudity or semi-nudity, films for restricted age groups, the presence of gaming machines.
9. Please list here steps you will take to promote all four licensing objectives together.
10. The application form must be signed.
11. An applicant's agent (for example solicitor) may sign the form on their behalf provided that they have actual authority to do so.
12. Where there is more than one applicant, both applicants or their respective agents must sign the application form.
13. This is the address which we shall use to correspond with you about this application.

This page is intentionally left blank





**Martin McColl**  
McColl's Martin's RSM-Coll

MARKING LTD  
10000  
10000  
10000  
10000

PROJECT TYPE DETAILS  
Alcohol License Application

Rev: Revise Details  
A. Revise Application - AD - 10.1.2013

STONS NO:	REV NO:	AA - 1230	SEMI/ETA
0102	A	AD - 1330	071
		AD - 1330	147

STORE NAME:  
LAMBURN

ADDRESS:  
11 HIGH STREET  
MUSGRAVE  
MUSGRAVE  
ROBYN  
ROBYN

STORE TEL: 0148 871 944

COMPRO REG DETAILS	GROUP NO:	MIN AREA
COMPACT: ON	3	00
PRIMO: 100		

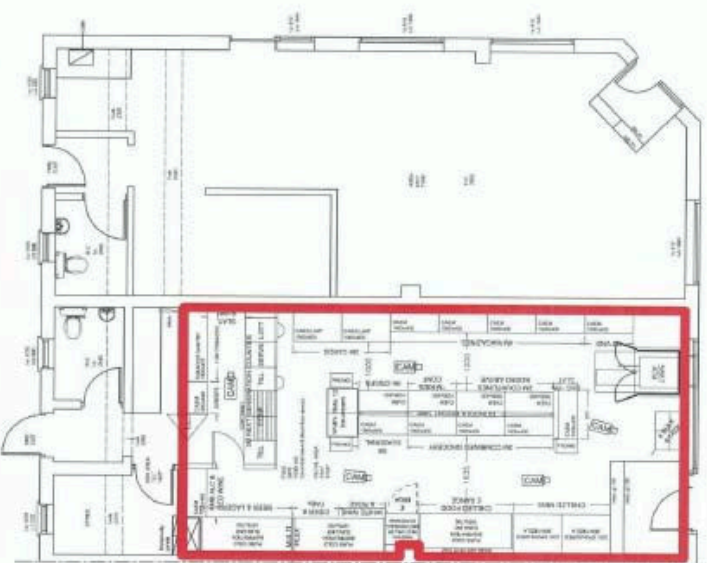
PROMOTION DETAILS	AGREED BY:
Phone Ext: 1	1000000000000000
Phone Numbers: 10	1000000000000000
Alcohol Licence: N	1000000000000000
Energy Meter: N	1000000000000000
Luxury DLT: Y	1000000000000000
P Application: Y	1000000000000000
Fire Risk QCR: N	1000000000000000
COX QCR: N	1000000000000000
Blank Vandal P: N	1000000000000000
ATM: TTY	1000000000000000
Photocopy: N	1000000000000000
Window Panels: N	1000000000000000
Wire Taps: N	1000000000000000

**NOTES:**

1. FIRE FIGHTING EQUIPMENT & ALL OF THE REQUIREMENTS OF THE FIRE SERVICE WILL BE INCORPORATED & WILL BE PROVIDED TO COMPLY WITH THE EUROPEAN STANDARDS
  2. ALL WALL/PERIMETER FIXTURES TO A HEIGHT OF 2.1M
  3. ALL FLOOR DISPLAYS TO A HEIGHT OF 1.5M
  4. COUNTER HEIGHT 985MM
- FIRE STANDARDS:**
1. FIRE SAFETY RELATED SIGNS AND NOTICES ARE TO THE HEALTH AND SAFETY (SAFETY SIGNS & SIGNALS) REGULATIONS ACT 1996, THOSE THAT COMPLY TO BS 5489, PART 1, 1990 ALSO COMPLY
  2. ILLUMINATED "EXIT" SIGNS ARE TO CONFORM TO BS2680
  3. FIRE FIGHTING EQUIPMENT IS TO COMPLY WITH EUROPEAN STANDARDS BS EN3 AND BS 7863

**FIRE SIGNAGE:**

-  EMERGENCY LIGHTING
-  FIRE ACTION SIGNAGE
-  FIRE EXIT WITH DIRECTIONAL ARROW
-  WATER FIRE EXTINGUISHER
-  CARBON DIOXIDE FIRE EXTINGUISHER
-  FOAM FIRE EXTINGUISHER  
(FIRE EXTINGUISHER SIGNAGE TO BE PROVIDED AT EACH LOCATION)
-  FIRE BELL
-  SMOKE DETECTOR
-  RED BREAK GLASS BOX
-  CCTV CAMERA



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# Agenda Item 3(2)

Licensing Act 2003 (Premises licences and club premises certificates) Regulations 2005 – Schedule 11, regulation 24

LIC11A

Consent of individual to be specified as premises supervisor

I, **Steve Mahoney**

of **18 Chiltern Close, Chelmsford, Essex, CM1 2GJ**

Hereby confirm that I give my consent to be specified as the designated premises supervisor in relation to the application for a premises licence

By **Martin McColl Limited**

Relating to a Premises Licence for **Martin McColls, 11 High Street, Lambourn, Hungerford, Berkshire, RG17 8XL**

And any premises licence to be granted or varied in respect of this application made by **Martin McColl Limited**

Concerning the supply of alcohol at **Martin McColls, 11 High Street, Lambourn, Hungerford, Berkshire, RG17 8XL**

I also confirm that I am applying for, intend to apply or currently hold a personal licence, details of which I set out below.

Personal licence number **EZ09/00067/LAPER**

Personal licence issuing authority: **Chelmsford**

Name **Steve Mahoney**

DOB: **28/07/1965**

Place of Birth: **Reading**

Signed

Dated **23/01/2013**

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3



EH & L  
19 FEB 2012  
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LICENSING ACT 2003

Representations form

Details of the representee:

Name ... MILDRED HETTY REITH  
Address ... 31 HIGH ST LAMBOURN  
... HUNGERFORD BERKSHIRE  
Postcode ... RG17 8XL  
Telephone Number ...  
Email address ...

Please note the Council is required under the Licensing Act 2003 (Hearings) Regulations 2005 to provide the applicant with copies of the relevant representations made.

Details of the application to make representation(s) on:

Application Reference Number ...  
Name of Premises ... MARTIN'S Newsagent  
Premises Address ... 11, High St  
... Lambourn  
Postcode ... RG17 8XL

Under the Licensing Act 2003, for a representation to be relevant it must be one that is about the likely effect of the application on the promotion of the four licensing objectives.

Please give details of your representation(s) and include information as to why the application would be unlikely to promote any of the following objective(s):

**The Prevention of Crime and Disorder:**

A further outlet for the sale of alcohol has the potential for drink consumption and problems arising - among young people

**Public Safety:**

.....  
.....  
.....  
.....

**The Prevention of Public Nuisance:**

The sale of alcohol late at night can well lead to drink consumption in the square and neighbouring housing estates

**The Protection of Children from Harm:**

The accessibility of alcohol could well be harmful to children

Signed:.....

Date:.....

18.2.13

Please send completed form to the Senior Licensing Officer at:

West Berkshire Council, Culture and Environmental Protection, Environmental Health & Licensing, Council Offices, Market Street, Newbury, Berkshire RG14 5LD



# Licence Application Notification

Inspector/NHPT	Inspector Lloyd
Licensing Officer	Mike King

Application Type	New	<del>Variation</del>	<del>Review</del>
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Date Received	28 <sup>th</sup> January 2013	Date Due	24 <sup>th</sup> February 2013
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Premises	Martins						
Address	High Street, Lambourn, Hungerford, West Berkshire						
Category of Premises	A	B	C				
Licensable Activities	<b>The Sale of Alcohol by Retail</b>						
	<del>The Supply of Alcohol in Club Premises</del>						
	<del>The Provision of Regulated Entertainment</del>						
	<del>The Provision of Late Night Refreshment</del>						
Finish Times	Mon	Tue	Wed	Thu	Fri	Sat	Sun
	23.00	23.00	23.00	23.00	23.00	23.00	23.00
<b>Content of Application:</b>							
<p>The application seeks to retail alcohol between 05.30 and the times and days itemised above.</p>							
<b>Licensing Officer's Comments:</b>							
<p>A negotiated start time of 08.00 for the sale of alcohol has been agreed with the companies licensing practitioner. There is a major problem in the area where the premise is situated in terms of anti-social behaviour and TVP have concerns that this new premise licence may have a likely effect on these levels. Therefore, Thames Valley Police <b>WISH TO OBJECT</b> to the application.</p>							
<b>NHPT Comments:</b>							
<p>Could the conditions on the licence reflect the statements in the operating schedule.</p>							

Signature:..... Date 21 01 2013

\*No signature is required if responding by email, as there will be an electronic trail

Due to the timescales involved, if no reply has been received before the end of the consultation period, the Licensing Office will deal with the application based upon the initial licensing officer's comments. Every attempt will be made to ensure that the local inspector and NHPT are aware of the application.

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**Subject:** Application for alcohol licence by Martin Mcoll, Lambourn.

I am writing as a resident of Lambourn who is totally opposed to the granting of an alcohol licence from 5.30 am to 11.30 pm to Martin Mcoll in Lambourn. Lambourn is already adequately served by establishments selling alcohol and it is well known that there is a significant problem already in Lambourn with alcohol. One only has to walk around the village and the local woods to see the empty beer cans and bottles, cider cans and bottles, wine and spirit bottles - all discarded and not only blighting the countryside but causing danger to the local wildlife. The children in the village are already exposed to a number of "known" alcoholics in the village who walk about beer cans in hand. The community police officer cannot be everywhere. All the granting of the licence will do is cause even more problems. To grant the licence will not, in my opinion, show a council acting responsibly.

I am also contacting my local MP to see if he can help in this matter as I think it is an irresponsible application by a company who is already making huge profits if its website is to be believed.

S Y Halifax

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EH & L  
21 FEB 2013  
RECEIVED



**LICENSING ACT 2003**

**Representations form**

Details of the representee:

Name MS D. M. ROBINSON

Address 4 NORTH FARM CLOSE

LAMBOURN

Postcode RG17 8YU

Telephone Number .....

Email address ..... m

Please note the Council is required under the Licensing Act 2003 (Hearings) Regulations 2005 to provide the applicant with copies of the relevant representations made.

Details of the application to make representation(s) on:

Application Reference Number None supplied

Name of Premises Martin's Newsagent

Premises Address 11 High St Lambour

Postcode RG17 8XL

Under the Licensing Act 2003, for a representation to be relevant it must be one that is about the likely effect of the application on the promotion of the four licensing objectives.

Please give details of your representation(s) and include information as to why the application would be unlikely to promote any of the following objective(s):

**The Prevention of Crime and Disorder:**

Not known

**Public Safety:**

Extended hours will lead to an increase in traffic in The High St.

**The Prevention of Public Nuisance:**

Not known

**The Protection of Children from Harm:**

Not known

Signed:

Date: 20/2/13

Please send completed form to the Senior Licensing Officer at:

West Berkshire Council, Culture and Environmental Protection, Environmental Health & Licensing, Council Offices, Market Street, Newbury, Berkshire RG14 5LD

EH & L

21 FEB 2013

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4 North Farm Close  
Lambourn RG17 8YU

20. 2. 13.

Dear Sir / Madam,

I enclose The relevant form for the application of an alcohol licence for Martini, Lambourn.

I am not in a position to judge crime & disorder, public nuisance, or protection of children, as I am not in Lambourn late at night. The High Street already has severe traffic problems which this application could make worse.

We are already well served by other shops in the High St. responsibly selling alcohol, plus 2 adjacent pubs.

Yours etc.



**From:** Lambourn Parish Council [lambournpc@btconnect.com]  
**Sent:** 22 February 2013 11:57  
**To:** Sharon Gavin  
**Subject:** Representation regarding Grant of Premises Licence

Lambourn Parish Council wishes to make objections to the application for a grant of sale of alcohol off the premises during the following hours: 5.30am (since amended to 8am) to 23.00 Monday to Sunday, at Martins, 11 High Street, Lambourn RG17 8XL.

It objects on the grounds that the layout of the shop is not conducive to selling alcohol under controlled conditions. This objection is on the grounds that the application would be unlikely to promote the prevention of crime and disorder, the protection of children from harm and the prevention of public nuisance.

It also objects on the grounds that providing a further outlook selling alcohol in a small area is not needed. This objection is on the grounds that the application would be unlikely to promote the prevention of crime and disorder, the protection of children from harm and the prevention of public nuisance.

Yours sincerely  
Anne Ray  
Clerk

**Lambourn Parish Council**  
**The Memorial Hall, Oxford Street, Lambourn, Berkshire. RG17 8XP**  
Telephone: 01488 72400  
*Clerk: Mrs Anne Ray*  
*Deputy Clerk: Mrs Karen Wilson*  
email: [lambournpc@btconnect.com](mailto:lambournpc@btconnect.com)

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